

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4506 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

IS THIS AN AMENDMENT? The Yes X No

Summary Sheet 21 JAN 18 AM 12: FILE NUMBER

CTY COU

(CFA-4)

INSTRUCTIONS: Please type or print legibly IN BLACK INK ell information on this form. For assistance in completing this form, see instructions on the reverse side. HAMILTON

TOTAL PAGES IN ENTIRE CFA-4 REPORT

COM	MITTEE INFORMATION						
1, Full Name of Committee (as on Statement of Organization)	Check if this is a new	name					
Terry Michael for Trustee							
2. Acronym or Abbreviated Namu (If any)		3. Committee Telephone Number					
		(317) 519-3306					
4. Mailing Address (address where all campaign finance correspond	fence is received) 🔲 C	heck if this i	s a new address				
10928 Geist Woods N Dr							
5. City, State, ZiP Code		6. Party Affiliation (If applicable) Republican					
Fishers, IN 46256							
CANDIDATE INFORMATION (For Candidate's Committees Only)							
7. Full Name of Candidate (Include any nickname)	ate (Include any nickname) 8. Party Affil			ffiliation or if Independent Candidate			
Terry L Michael		Republican					
9. Office Sought (Include district number, it any. Not required for e.	xploratory committee.)	10. County of Residence					
Fall Creek TownshipTrustee	Hamilton						
		(15)					
TYPE OF REPOR	T		CONVENTIO	N CANDIDATES ONLY			
11. Check one:			Check one:				
Pre-Primary Pre-Election X Annual Nomination Other			Pre-Convention				
X Final/Disbands Committee (lines 18, 19, and 20 must be 10.) Utgoing Treasurer (within 10 days amend Statement of Organization)							
12. Reporting Period:			COLUMN A	COLUMN B			
From: 01/01/2010 Th	rough: 05/31/2 <u>010</u>		This Period	Year to Dato			
13. Cash on hand and investments at the beginning of this reporting period.			0.00				
14. Cash on hand and investments January 1, current year.				0.00			
CONTRIBUTIONS AND RECEIPTS							
(Note: these amounts include ir -kind contributions and loans, as well as cash contributions.)							
15a. Itemized (use Schedule A)			2400.00	2400.00			
15b, Unitemized							
15c. Add lines 15a and 15b in t oth columns	SUB'	TOTAL					
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Colu	mn B	TOTAL.					
EXPENDITURES							
(Note: These amounts include in-kind expenditures and loan repays	ments.)						
17a. Itemized (use Schedule B, (Public Question: use Schedule C)							
17b. Uniternized							
17c. Add lines 17a and 17b in I oth columns	Sul	STOTAL	2400.00	2400.00			
			0.00				
18. Cash on hand and investments at close of this reporting period (subtrect	1 /c from 16 in both columns)	TOTAL		0.00			
19. Debts OWED BY the committee (use Schedule D)			= 0.00				
20. D			0.00 0.00				
TION FOR OFFICE USE ONLY							
Stand							
	18-11	1	7-18-11				
Signa		Da	ite -	: :			



REPORT ()F RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4600 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CO (TRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK (INK all Information on the schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to discument contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from Individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular per y committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular perty committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

FILE NUMBER					
Page	of				

CONTRIBUTOR'S FULL NAME AND OCCUPATION	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE
FULL MAILING ADDRESS	OR OTHER RECEIPT	AMOUNT THIS	CUMULATIVE	RECEIVED
(street, number_dity, state, ZIP code)		PERIOD 2150.00	YEAR-TO-DATE 2150.00	05/03/2010
1. Terry L Michael 10928 Geist Woods N Dr	Contributions:	2130.00	2130.00	00,00.2010
Indianapolis, IN 46256	X In-Kind (describe)			
	Advertising			
	Other Receipts:			05/03/2010
	interest Loan Misc. (specify)			
	Misc. (specify)	ų.		
Contributor's Occupation (if required)		250.00	250.00	
2. Terry L Michael 10928 Gefst Woods N Dr	Contributions: Direct	250.00	250.00	
Indianapolis, IN 45296	X In-Kind (describe)			
	Bumper Stickers			
	Other Receipts:			Terry L
•	interest Losn			Michael
	Misc. (specify)	'		
Contributor's Occupation (if required)				
1.	Contributions: Direct			
	in-Kind (describe)			
	Other Receipts:			
	Interest Loan			
	Misc. (specify)			
Contributor's Occupation (If required)				
4.	Contributions:		_	
	☐ Direct☐ In-Kind (describe)			
	LITERIO (DESCRIDE)			
	Other Receipts:			
	interest Loan			
	Misc. (specify)			
Contributor's Occupation (if required)				
5.	Contributions:			
	☐ Direct ☐ In-Kind (describe)			
	E m-rand (best/roc)			
	Other Receipts:			
	Interest Loan			
	Misc. (specify)			
Contributor's Occupation (if required)				
SUBTOTAL	THIS PAGE OF SCHEDULE A	\$2400.00		
TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY	\$2400.00		
/Enter total on ITE	VI 15a of the Summary Sheet)			